

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

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|---|--|---|---|---|---|
| NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES FUND | | | FEC IDENTIFICATION NUMBER ▼ C C00448696 | | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | | | | | |
| Full Name (Last, First, Middle Initial) of Payee Twitter, Inc. | | | Date 05 / 15 / 2013 | | |
| Mailing Address 1355 Market St., Ste. 900 | | | Amount 15000.00 | | |
| City State Zip Code San Francisco CA 94103 | | Transaction ID : SE.4891 | | | |
| Purpose of Expenditure IE-Pryor-Online Ads | | Category/ Type 004 | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | | State: AR District: 00 |
| Name of Federal Candidate Supported or Opposed by Expenditure: MARK L PRYOR | | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | | |
| Full Name (Last, First, Middle Initial) of Payee | | | Date M M / D D / Y Y Y Y Y Y | | |
| Mailing Address | | | Amount | | |
| City State Zip Code | | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| Purpose of Expenditure | | Category/ Type | State: _____ District: _____ | | Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure: | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | | |
| Calendar Year-To-Date Per Election for Office Sought | | | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... | | | 15000.00 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | | |
| (c) TOTAL Independent Expenditures..... | | | 15000.00 | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Signature Lisa Lisker | | [Electronically Filed] | | Date 05 / 15 / 2013 | |